·								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003								10/70 793					
CLAIMS AS FILED - PART I (Column 1) (Colu						ımn 2)		SMALL TYPE	ENT	7 7 7 7	OR	OTHER	
TOTAL CLAIMS								RATE FEE		FEE	1	RATE	FEE
FOR			NUMBER	NUMBER FILED NUM		ER EXTRA		BASIC F	EE 3	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			) minus 20= * /				X\$ 9		.		OR	X\$18=	
INDEPENDENT CLAIMS			/ minus 3 = * /				X43:				OR	X86=	
MU	ILTIPLE DEPE	NDENT CLAIM P	RESENT					+145=			OR	+290=	=
* If	the difference	e in column 1 is	less than z	less than zero, enter "0" in column 2				TOTAL	4	385	OR	TOTAL	
	CLAIMS AS AMENDED - PART II							•	_		ı	OTHER	THAN
		n 2)	(Column 3)		SMAL	L EN	TITY	OR	SMALL				
AMENDMENT A	3-29-05	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	TI	NDDI- ONAL FEE		RATE	ADDI- TIONAL FEE
NOM	Total	. !	Minus	- 20	)	= /		X\$ 9=	77		OR	X\$18=	
AME	Independent	. 3	Minus	<del> 3</del>		=/	ſ	X43=	7		OR	X86=	/
Ш	FIRST PRESE	ENTATION OF MI	JUTIPLE DEI	PENDENT	CLAIM		Ì	+145=	1			+290= /	1
	·								T		OR	TOTAL	
	. (Column 1) (Column 2) (Column 3)							ADDIT. FEEOR ADDIT. FEE					
8	CLAIMS		T	HIGHEST			F		IA	ADDI-			ADDI-
AMENDMENT E		REMAINING AFTER AMENDMENT		PREVIOU PAID FO	JSLY	PRESENT EXTRA		RATE	TK	ONAL FEE		RATE	TIONAL
NDN	Total	*	Minus	**		=		X\$ 9=			OR	X\$18=	
AME.	Independent	<u>.*</u>	Minus	***		*	T	X43=	十		OR	X86=	
	FIRST PRESE	NTATION OF ML	ILTIPLE DEP	'ENDENT C	CLAIM				╁╌		ı		
+145=											OR	+290=	
TOTAL ADDIT. FEE											OR ,	TOTAL ADDIT. FEE	
	·	(Column 1)	,	(Column		(Column 3)							
AMENDMENT C	·	REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R ISLY	PRESENT EXTRA		RATE	TIC	DDI- DNAL EE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	I	X\$·9=			OR	X\$18=	
WE.	Independent	•	Minus	###		=	H	X43=	<del> </del>			X86=	
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								╁		OR	7,00-	
* If the entry in column 1 is less than the entry in column 2 write 50° in column 2										OR	+290=		
**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											OR A	TOTAL DDIT, FEE	
T	he *Highest Num	iber Previously Paid	I For (Total or	Independent	ess than I) is the I	i 3, enter "3." highest number (	found	d in the a	ppropr	riate box	in colu	mn 1.	